



WATER AND SEWER
CUSTOMER SERVICE
P.O. Box 427
Herndon, VA 20172-0427
(703) 435-6814
utilities@herndon-va.gov
herndon-va.gov



Owner Resident Water/Sewer Application **Account #** _____

Required Items:

Name _____

Property Address _____

Mailing Address _____

Start Date _____

Phone # _____

Photo ID # _____

SS # (or Tax ID #) _____

HUD 1 or Sales Agreement

I confirm that all of the above information provided is correct.

I understand that I am not being charged a deposit, but if my account is delinquent I may be required to pay a deposit of 125% x my average quarterly bill, which will be held as a prepayment towards my final bill, according to Town Ordinance Article IV, Section. 74-421.

I agree to pay all amounts due on this account, including any and all costs associated with collection of unpaid bills.

Owner Signature: _____

Date _____

Department of Finance

777 Lynn Street, Herndon, Virginia 20170-4602 FAX (703) 435-8121
www.herndon-va.gov